

Checked by (initials)	Date:	Set for status?
Status:	Settlement:	Trial:
Continued?	Final Order?	Date:
D. Served: ? Yes ? No Date:	Reason:	
Amount: \$		

Fairfax County Circuit Court Law Case Cover Sheet

Date Filed: _____

Case Number: _____

PLEASE COMPLETE ALL SHADED AREAS.

Parties:

Plaintiffs	Defendants	Service Date/Type
1. Name:	1. Name:	
2. Name:	2. Name:	
3. Name:	3. Name:	
4. Name:	4. Name:	
Attorney Bar ID:	Attorney Bar ID:	
	Answer? <input type="checkbox"/>	
Name:	Name:	
Firm:	Firm:	
Street:	Street:	
City: State: Zip:	City: State: Zip:	
Phone Number:	Phone Number:	

Nature of Suit (Check only one):

<input type="checkbox"/> 3. Appeal of Commitment (AC)	<input type="checkbox"/> 2. Appeal of Process (O)	<input type="checkbox"/> 20. Personal Injury - Auto (J)
<input type="checkbox"/> 6. Confession of Judgment (CJ)	<input type="checkbox"/> 4. Attachment (ATT)	<input type="checkbox"/> 21. Personal Injury - Emotional (J)
<input type="checkbox"/> 13. Garnishment (GARN)	<input type="checkbox"/> 5. Condemnation (COND)	<input type="checkbox"/> 22. Personal Injury - Premises Liability (J)
<input type="checkbox"/> 14. Habitual Offender (HO)	<input type="checkbox"/> 7. Construction (J)*	<input type="checkbox"/> 23. Property Damage (J)
<input type="checkbox"/> Federal Garnishment (GUSA)	<input type="checkbox"/> 8. Contract (J)	<input type="checkbox"/> 24. Products Liability (J)
<input type="checkbox"/> Compromise Pet. (COMP)	<input type="checkbox"/> 9. Conversion (J)	<input type="checkbox"/> 25. Removal (R)
<input type="checkbox"/> Concealed Weapon Permit (CWP)	<input type="checkbox"/> 10. Defamation (J)	<input type="checkbox"/> 26. Writs Habeas Corpus (HC)
<input type="checkbox"/> Name Change (NC)	<input type="checkbox"/> 11. Erroneous Assessment (EA)	<input type="checkbox"/> 27. Writs Certiorari (WC)
<input type="checkbox"/> Petition (O)	<input type="checkbox"/> 12. False Arrest/Imprisonment (O)	<input type="checkbox"/> 28. Writs Mandamus (MAND)
<input type="checkbox"/> Petition - Plaintiff Only (OP)	<input type="checkbox"/> 15. Insurance (J)	<input type="checkbox"/> 29. Wrongful Death (J)
<input type="checkbox"/> Transfer from Chy. (TCHY)	<input type="checkbox"/> 16. Malicious Prosecution (J)	<input type="checkbox"/> 30. Wrongful Discharge (J)
<input type="checkbox"/> Appeal DMV H.O. Determination (HOA)	<input type="checkbox"/> 17. Malpractice - Legal (J)	<input type="checkbox"/> 31. Other (specify)
	<input type="checkbox"/> 18. Malpractice - Medical (J)	<input type="checkbox"/> 32. Delinquent Taxes (J)
<input type="checkbox"/> 1. Appeal GDC/small claims (APPL)	<input type="checkbox"/> 19. Personal Injury - Assault (J)	
REQUESTED SERVICE: <input type="checkbox"/> SHERIFF <input type="checkbox"/> SPECIAL PROCESS SERVER <input type="checkbox"/> NO SERVICE AT THIS TIME <input type="checkbox"/> OTHER		

*J = Motion for Judgment